

**Fill in this information to identify the case:**

United States Bankruptcy Court for the:

District of Massachusetts  
(State)

Case number (if known): \_\_\_\_\_ Chapter 7

☐ Check if this is an amended filing

Official Form 205

**Involuntary Petition Against a Non-Individual**

12/15

Use this form to begin a bankruptcy case against a non-individual you allege to be a debtor subject to an involuntary case. If you want to begin a case against an individual, use the *Involuntary Petition Against an Individual* (Official Form 105). Be as complete and accurate as possible. If more space is needed, attach any additional sheets to this form. On the top of any additional pages, write debtor's name and case number (if known).

**Part 1: Identify the Chapter of the Bankruptcy Code Under Which Petition Is Filed**

1. Chapter of the Bankruptcy Code

Check one:

☒ Chapter 7

☐ Chapter 11

**Part 2: Identify the Debtor**

2. Debtor's name 4Run3 Racing LLC

3. Other names you know the debtor has used in the last 8 years

Include any assumed names, trade names, or doing business as names.

4. Debtor's federal Employer Identification Number (EIN)

☒ Unknown

EIN \_\_\_\_\_

5. Debtor's address

Principal place of business

Mailing address, if different

78 Center Square  
Number Street

Number Street

P.O. Box

East Longmeadow MA 01028  
City State ZIP Code

City State ZIP Code

Location of principal assets, if different from principal place of business

Hampden

County

Number Street

City State ZIP Code

Debtor 4Run3 Racing LLC  
Name

Case number (if known) \_\_\_\_\_

6. Debtor's website (URL) \_\_\_\_\_

7. Type of debtor

- ☒ Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))  
☐ Partnership (excluding LLP)  
☐ Other type of debtor. Specify: \_\_\_\_\_

8. Type of debtor's business

Check one:

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))  
☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))  
☐ Railroad (as defined in 11 U.S.C. § 101(44))  
☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))  
☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))  
☐ Clearing Bank (as defined in 11 U.S.C. § 781(3))  
☒ None of the types of business listed.  
☐ Unknown type of business.

9. To the best of your knowledge, are any bankruptcy cases pending by or against any partner or affiliate of this debtor?

- ☒ No  
☐ Yes. Debtor \_\_\_\_\_ Relationship \_\_\_\_\_  
District \_\_\_\_\_ Date filed \_\_\_\_\_ Case number, if known \_\_\_\_\_  
MM / DD / YYYY  
Debtor \_\_\_\_\_ Relationship \_\_\_\_\_  
District \_\_\_\_\_ Date filed \_\_\_\_\_ Case number, if known \_\_\_\_\_  
MM / DD / YYYY

**Part 3: Report About the Case**

10. Venue

Check one:

- ☒ Over the last 180 days before the filing of this bankruptcy, the debtor had a domicile, principal place of business, or principal assets in this district longer than in any other district.  
☐ A bankruptcy case concerning debtor's affiliates, general partner, or partnership is pending in this district.

11. Allegations

Each petitioner is eligible to file this petition under 11 U.S.C. § 303(b).  
The debtor may be the subject of an involuntary case under 11 U.S.C. § 303(a).

At least one box must be checked:

- ☒ The debtor is generally not paying its debts as they become due, unless they are the subject of a bona fide dispute as to liability or amount.  
☐ Within 120 days before the filing of this petition, a custodian, other than a trustee, receiver, or an agent appointed or authorized to take charge of less than substantially all of the property of the debtor for the purpose of enforcing a lien against such property, was appointed or took possession.

12. Has there been a transfer of any claim against the debtor by or to any petitioner?

- ☒ No  
☐ Yes. Attach all documents that evidence the transfer and any statements required under Bankruptcy Rule 1003(a).

Debtor 4Run3 Racing LLC  
Name

Case number (if known) \_\_\_\_\_

13. Each petitioner's claim	Name of petitioner	Nature of petitioner's claim	Amount of the claim above the value of any lien
	Smile Like Jack Memorial Fund, Inc.	Funds of Petitioner not remitted by Debtor	\$ 7,000.00
	SMOC Open Pantry Community Services, Inc.	see above	\$ 12,769.59
	Hampden County Bar Foundation, Inc.	see above	\$ 3,489.50
	See additional names on Page 3(b)		
		Total of petitioners' claims	\$ 29,881.09

If more space is needed to list petitioners, attach additional sheets. Write the alleged debtor's name and the case number, if known, at the top of each sheet. Following the format of this form, set out the information required in Parts 3 and 4 of the form for each additional petitioning creditor, the petitioner's claim, the petitioner's representative, and the petitioner's attorney. Include the statement under penalty of perjury set out in Part 4 of the form, followed by each additional petitioner's (or representative's) signature, along with the signature of the petitioner's attorney.

#### Part 4: Request for Relief

**WARNING** -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Petitioners request that an order for relief be entered against the debtor under the chapter of 11 U.S.C. specified in this petition. If a petitioning creditor is a corporation, attach the corporate ownership statement required by Bankruptcy Rule 1010(b). If any petitioner is a foreign representative appointed in a foreign proceeding, attach a certified copy of the order of the court granting recognition.

I have examined the information in this document and have a reasonable belief that the information is true and correct.

#### Petitioners or Petitioners' Representative

##### Name and mailing address of petitioner

Name \_\_\_\_\_  
Number Street \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

##### Name and mailing address of petitioner's representative, if any

Name \_\_\_\_\_  
Number Street \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

I declare under penalty of perjury that the foregoing is true and correct.

Executed on MM / DD / YYYY

☒ Signature of petitioner or representative, including representative's title

#### Attorneys

Jonathan R. Goldsmith, Esq.

Printed name

Goldsmith, Katz & Argenio, P.C.

Firm name, if any

1350 Main Street, Suite 1505

Number Street

Springfield

MA

01103

City

State

ZIP Code

Contact phone (413) 747-0700 Email [jgoldsmith@gkalawfirm.com](mailto:jgoldsmith@gkalawfirm.com)

Bar number 548285

State MA

State

Signature of attorney

Date signed

5/23/2024  
MM / DD / YYYY

\*(see Co-Counsel information of Page 3(a) attached)

Debtor: 4Run3 Racing LLC

Case Number (if known) \_\_\_\_\_

**Co-Counsel for Petitioners or Petitioners' Representative**

Katie Manzi McDonough, Esq.  
Printed Name

Egan, Flanagan & Cohen  
Firm name, if any

67 Market Street  
Number Street

Springfield MA 01103  
City State ZIP Code

Contact phone (413) 737-0260 Email kmm@efclaw.com

Bar number 688053

State MA

15)  
Signature of attorney

Date signed: 05/23/2024  
MM/DD/YYYY

Debtor: 4Run3 Racing LLC

Case Number (if known) \_\_\_\_\_

13. Each petitioner's claim	Name of Petitioner	Nature of petitioner's claim	Amount of the claim above the value of any lien
	<u>Miles for Mary (STCC) Foundation</u>	<u>Funds of Petitioner not remitted by Debtor</u>	<u>\$ 5,316.00</u>
	<u>Junior League of Greater Springfield MA, Inc.</u>	<u>See above</u>	<u>\$ 1,306.00</u>

Debtor 4Run3 Racing LLC  
Name

Case number (if known) \_\_\_\_\_

Name and mailing address of petitioner

Smile Like Jack Memorial Fund, Inc.

Name

62-B School Street

Number Street

Westfield

MA

01085

City

State

ZIP Code

Name and mailing address of petitioner's representative, if any

Michael O'Brien (President)

Name

532 Pine Road

Number Street

East Otis

MA

01029

City

State

ZIP Code

I declare under penalty of perjury that the foregoing is true and correct.

Executed on

5/23/2024  
MM / DD / YYYY

X

Signature of petitioner or representative, including representative's title

Printed name

Firm name, if any

Number Street

City

State

ZIP Code

Contact phone

Email

Bar number

State

X

Signature of attorney

Date signed

MM / DD / YYYY

Name and mailing address of petitioner

Name

Number Street

City

State

ZIP Code

Name and mailing address of petitioner's representative, if any

Name

Number Street

City

State

ZIP Code

I declare under penalty of perjury that the foregoing is true and correct.

Executed on

MM / DD / YYYY

X

Signature of petitioner or representative, including representative's title

Printed name

Firm name, if any

Number Street

City

State

ZIP Code

Contact phone

Email

Bar number

State

X

Signature of attorney

Date signed

MM / DD / YYYY



UNITED STATES BANKRUPTCY COURT  
DISTRICT OF MASSACHUSETTS

In re:	)	Involuntary
	)	Chapter 7
4Run3 Racing LLC	)	Case No.
	)	
Debtor	)	
	)	

STATEMENT OF CORPORATE OWNERSHIP

As required by Fed.R.Bankr.P. 1007(a)(1), the debtor now files this Corporate Ownership Statement and reports as follows:

(Check one box only.)

- ☐ Debtor is not a "corporation" as defined in 11 U.S.C. §101(9).
- ☒ Debtor is a "corporation" as defined in 11 U.S.C. §101(9) but has no entities to report under Fed.R.Bankr.P. 1007(a)(1).
- ☐ Debtor is a "corporation" as defined in 11 U.S.C. §101(9), and the following corporations directly or indirectly own 10% or more of any class of the debtor's equity interests: (List corporations below.)

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

(For additional names, attach an addendum to this form.)

Dated: \_\_\_\_\_

Signature of Authorized Individual for Corporate Debtor/Party

MICHAEL O'BRIEN

Printed Name of Authorized Individual for Corporate Debtor/Party

President

Title of Authorized Individual for Corporate Debtor/Party

Debtor 4Run3 Racing LLC  
Name

Case number (if known) \_\_\_\_\_

Name and mailing address of petitioner

Open Pantry Community Services, Inc.  
Name  
7 Bishop Street  
Number Street  
Framingham MA 01702  
City State ZIP Code

Printed name \_\_\_\_\_

Firm name, if any \_\_\_\_\_

Number Street \_\_\_\_\_

City State ZIP Code \_\_\_\_\_

Contact phone \_\_\_\_\_ Email \_\_\_\_\_

Bar number \_\_\_\_\_

State \_\_\_\_\_

Name and mailing address of petitioner's representative, if any

Susan Gentili (CEO)  
Name  
7 Bishop St  
Number Street  
Framingham MA 01702  
City State ZIP Code

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 5/23/24  
MM / DD / YYYY

x [Signature]  
Signature of petitioner or representative, including representative's title

x \_\_\_\_\_  
Signature of attorney

Date signed \_\_\_\_\_  
MM / DD / YYYY

Name and mailing address of petitioner

\_\_\_\_\_  
Name  
\_\_\_\_\_  
Number Street  
\_\_\_\_\_  
City State ZIP Code

Printed name \_\_\_\_\_

Firm name, if any \_\_\_\_\_

Number Street \_\_\_\_\_

City State ZIP Code \_\_\_\_\_

Contact phone \_\_\_\_\_ Email \_\_\_\_\_

Bar number \_\_\_\_\_

State \_\_\_\_\_

Name and mailing address of petitioner's representative, if any

\_\_\_\_\_  
Name  
\_\_\_\_\_  
Number Street  
\_\_\_\_\_  
City State ZIP Code

I declare under penalty of perjury that the foregoing is true and correct.

Executed on \_\_\_\_\_  
MM / DD / YYYY

x \_\_\_\_\_  
Signature of petitioner or representative, including representative's title

x \_\_\_\_\_  
Signature of attorney

Date signed \_\_\_\_\_  
MM / DD / YYYY



UNITED STATES BANKRUPTCY COURT  
DISTRICT OF MASSACHUSETTS

	)	Involuntary
In re:	)	Chapter 7
	)	Case No.
4Run3 Racing LLC	)	
	)	
Debtor	)	
	)	

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- ☒ Debtor is a "corporation" as defined in 11 U.S.C. §101(9), and the following corporations directly or indirectly own 10% or more of any class of the debtor's equity interests: (List corporations below.)

Name: South Middlesex Opportunity Council, Inc.

Address: 7 Bishop St., Framingham, MA 01702

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

(For additional names, attach an addendum to this form.)

Dated: 5/23/24

Susan Gentili  
Signature of Authorized Individual for Corporate Debtor/Party

Susan Gentili  
Printed Name of Authorized Individual for Corporate Debtor/Party

President  
Title of Authorized Individual for Corporate Debtor/Party

Debtor 4Run3 Racing LLC  
Name

Case number (if known) \_\_\_\_\_

Name and mailing address of petitioner

Hampden County Bar Foundation, Inc.

Name

50 State Street, Room 137

Number Street

Springfield

MA

01103

City

State

ZIP Code

Name and mailing address of petitioner's representative, if any

Noreen Nardi (CEO)

Name

12 Willow Circle

Number Street

Easthampton

MA

01027

City

State

ZIP Code

I declare under penalty of perjury that the foregoing is true and correct.

Executed on

5/23/2024  
MM / DD / YYYY

x Noreen Nardi CEO

Signature of petitioner or representative, including representative's title

Printed name

Firm name, if any

Number Street

City

State

ZIP Code

Contact phone

Email

Bar number

State

x

Signature of attorney

Date signed

MM / DD / YYYY

Name and mailing address of petitioner

Name

Number Street

City

State

ZIP Code

Name and mailing address of petitioner's representative, if any

Name

Number Street

City

State

ZIP Code

I declare under penalty of perjury that the foregoing is true and correct.

Executed on

MM / DD / YYYY

x

Signature of petitioner or representative, including representative's title

Printed name

Firm name, if any

Number Street

City

State

ZIP Code

Contact phone

Email

Bar number

State

x

Signature of attorney

Date signed

MM / DD / YYYY

UNITED STATES BANKRUPTCY COURT  
DISTRICT OF MASSACHUSETTS

	)	Involuntary
In re:	)	Chapter 7
	)	Case No.
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	)	
Debtor	)	
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Address: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

(For additional names, attach an addendum to this form.)

Dated: \_\_\_\_\_

Noreen E. Nardi  
Signature of Authorized Individual for Corporate Debtor/Party

Noreen E. Nardi  
Printed Name of Authorized Individual for Corporate Debtor/Party

CEO  
Title of Authorized Individual for Corporate Debtor/Party

Debtor

4 Run 3 Racing LLC  
Name

Case number (if known) \_\_\_\_\_

**Name and mailing address of petitioner**

Mary Malone Regan Memorial Scholarship  
Name of Committee

18 Bowdoin Street  
Number Street

Westfield MA 01085  
City State ZIP Code

Printed name \_\_\_\_\_

Firm name, if any \_\_\_\_\_

Number Street \_\_\_\_\_

City State ZIP Code \_\_\_\_\_

Contact phone \_\_\_\_\_ Email \_\_\_\_\_

Bar number \_\_\_\_\_

State \_\_\_\_\_

**Name and mailing address of petitioner's representative, if any**

Elizabeth G. Malone  
Name

18 Bowdoin Street  
Number Street

Westfield MA 01085  
City State ZIP Code

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 5/23/2024  
MM / DD / YYYY

X

Signature of attorney \_\_\_\_\_

Date signed \_\_\_\_\_  
MM / DD / YYYY

X Elizabeth G. Malone  
Signature of petitioner or representative, including representative's title

**Name and mailing address of petitioner**

Name \_\_\_\_\_

Number Street \_\_\_\_\_

City State ZIP Code \_\_\_\_\_

Printed name \_\_\_\_\_

Firm name, if any \_\_\_\_\_

Number Street \_\_\_\_\_

City State ZIP Code \_\_\_\_\_

Contact phone \_\_\_\_\_ Email \_\_\_\_\_

Bar number \_\_\_\_\_

State \_\_\_\_\_

**Name and mailing address of petitioner's representative, if any**

Name \_\_\_\_\_

Number Street \_\_\_\_\_

City State ZIP Code \_\_\_\_\_

I declare under penalty of perjury that the foregoing is true and correct.

Executed on \_\_\_\_\_  
MM / DD / YYYY

X

Signature of attorney \_\_\_\_\_

Date signed \_\_\_\_\_  
MM / DD / YYYY

X \_\_\_\_\_  
Signature of petitioner or representative, including representative's title



UNITED STATES BANKRUPTCY COURT  
DISTRICT OF MASSACHUSETTS

In re:	)	Involuntary
	)	Chapter 7
4Run3 Racing LLC	)	Case No.
	)	
Debtor	)	
	)	

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Name: \_\_\_\_\_

Address: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

(For additional names, attach an addendum to this form.)

Dated:

Elizabeth G. Malone  
Signature of Authorized Individual for Corporate Debtor/Party

Elizabeth G. Malone  
Printed Name of Authorized Individual for Corporate Debtor/Party

Committee Chair  
Title of Authorized Individual for Corporate Debtor/Party

Debtor

Name

Case number (if known)

**Name and mailing address of petitioner**

Junior League of Greater Springfield,  
Name MA., Inc.

Printed name

Post Office Box 2634  
Number Street

Firm name, if any

Springfield MA 01106  
City State ZIP Code

Number Street

City State ZIP Code

**Name and mailing address of petitioner's representative, if any**

Laura A. Harratty, Ph.D.  
Name as Vice President and President  
32 Baymore Drive Elect  
Number Street

Contact phone

Email

Bar number

East Longmeadow MA 01028  
City State ZIP Code

State

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 5/23/2024  
MM / DD / YYYY

X

Signature of attorney

Date signed

MM / DD / YYYY

Signature of petitioner or representative, including representative's title

**Name and mailing address of petitioner**

Name

Printed name

Number Street

Firm name, if any

City State ZIP Code

Number Street

City State ZIP Code

**Name and mailing address of petitioner's representative, if any**

Name

Contact phone

Email

Number Street

Bar number

City State ZIP Code

State

I declare under penalty of perjury that the foregoing is true and correct.

Executed on  
MM / DD / YYYY

X

Signature of attorney

Date signed

MM / DD / YYYY

Signature of petitioner or representative, including representative's title



UNITED STATES BANKRUPTCY COURT  
DISTRICT OF MASSACHUSETTS

_____	)	Involuntary
In re:	)	Chapter 7
4Run3 Racing LLC	)	Case No.
	)	
Debtor	)	
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Name: \_\_\_\_\_

Address: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

(For additional names, attach an addendum to this form.)

Dated: \_\_\_\_\_

  
\_\_\_\_\_  
Signature of Authorized Individual for Corporate Debtor/Party

Laura A. Hanratty, PhD  
\_\_\_\_\_  
Printed Name of Authorized Individual for Corporate Debtor/Party

Vice President and President Elect  
\_\_\_\_\_  
Title of Authorized Individual for Corporate Debtor/Party